_	Effective December 8, 2004							;	110)/W	4/1	63
	:	CLA	ims as	FILED - PAF	RTI	. ,				1	4 · t	
· · · · · · · · · · · · · · · · · · ·				(Column 1) (C		(Column 2)		TYPE	ENTITY	o		HER THAN
TOTAL CLAIMS								RATE	FEE		RATI	E' FEI
FOR				NUMBER FILED		NUMBER EXTRA		BASIC FI	EE		BASIC F	EE
T	TOTAL CHARGEABLE CLAIMS			minus	20= •			X\$ 25=	=	OF	X\$50	=
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M	ILTIPLE DEPENDENT CLAIM PRE		PRESEN	Τ .		0		+180=		O.F	+360=	:
ĵ	If the differen	ence in column	ı 1 is les	s than zero, en	iter "0"	in column 2	-	TOTA	AL.	OF	TOT	AL
∤	CLAIMS AS FILED - PART II								• .		OTU	
<u>_</u>	, 411	(Column 1)	(Column 2)) .	(Column 3)	_	SMALL	ENTITY	OR		ER THAN L ENTITY
AMENDIMENTA		REMAINING AFTER AMENDMEN	-	HIGHEST NUMBER PREVIOUSL PAID FOR	Y PI	RESENT EXTRA		RATE	ADDI- TIONAI FEE		RATE	· ADDI-
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AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PR	ESENT EXTRA		RATE	ADDI- TIONAL FEE	1 .	RATE	ADDI- TIONAL FEE
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لـــــ	I INST PRE	SENTATION OF	F MULTI	PLE DEPENDEN	IT CLA	М 🗌		+180=		OR	+360=	
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i ŀ		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	PRE	(Column 3)		RATE	ADDI- TIONAL FEE	[RATE	ADDI- TIONAL FEE
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f (l If ti	he entry in colu he "Highest No	ımn 1 is less than Imber Previously	the entry	in column 2, write IN THIS SPACE IS	"0" in α	olumn 3	. A	TOTAL DDIT: FEE		DR A	TOTAL DDIT. FEE	

PATERI APPLICATION FEE DETERMINATION RECORD

" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

FORM PTO-875 (Rev -10/04)

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